

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

yes

no

Ms.

Mr. Artist Mark Scholtz

(Last Name Last)

Permanent

Address 9634 Silk Ave. Cleveland

Street

City

44102

Tel. (216) 651-4190

Zip

Area Code

Temporary or

Studio Address

Street

City

Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in? _____

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

Artist will pick up at Museum.

Museum should dispose of.

Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 7, 1981.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Mark Scholtz

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials *OIL ON CANVAS*

Title

Trees and Factory Wall

Price or NFS

Insurance Value
if NFS Only

Size

*\$400.00**32" X 42"*

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

X

REJECTED

DO NOT WRITE IN THIS SECTION

ACCEPTED

X

REJECTED

*74(1)***2**

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials *OIL ON CANVAS*

Title

Bus Riders

Price or NFS

Insurance Value
If NFS OnlySize
*28" X 36"**\$400.00*

GRAPHICS AND PHOTOGRAPHY ONLY

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For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

X

REJECTED

DO NOT WRITE IN
THIS SECTION

ACCEPTED

RECEIVED

X

DATE

75(1)